



UNITED STATES SENATE COMMITTEE ON VETERANS AFFAIRS
HEARING ON "MAKING THE VA THE WORKPLACE OF CHOICE FOR HEALTH
CARE PROVIDERS"

Testimony of Randy Phelps, Ph.D.
Deputy Executive Director for Professional Practice
American Psychological Association
April 9, 2008

ORAL STATEMENT

Chairman Akaka, Ranking Member Burr, and distinguished members of the committee, I am Dr. Randy Phelps, Deputy Director for Professional Practice of the American Psychological Association ("APA"), the largest association of psychologists, with approximately 90,000 full members and 50,000 graduate student members engaged in the study, research, and practice of psychology. I am a licensed clinical psychologist, a former practitioner, clinical researcher and educator, and for the past 15 years on the APA executive staff, have served as APA's liaison to professional psychology in the Department of Veterans Affairs.

APA appreciates the opportunity to testify today on making the VA the workplace of choice for psychologists. I should note that VA is already the workplace of choice for many of our members, with about 2,400 psychologists in the system. VA is, in fact, the largest single employer of psychologists in the country. APA supports VA's aggressive and recent efforts to recruit new psychologists, but has concerns about a number of policies and procedures which are negatively affecting both recruitment and retention.

APA's Contribution to Growing Needs

Professional psychology as a discipline was "born" as a result of the needs of this nation's returning World War II heroes, and psychologists are acutely aware of the debt we owe to those veterans and to the brave men and women who have followed in their footsteps, as well as to the system of care this country has evolved to minister to their healthcare needs.

*750 First Street, NE
Washington, DC 20002-4242
(202) 336-5913
(202) 336-5997 fax
(202) 336-6123 TDD*

Web: www.APA.org

And, APA is acutely aware that there are over 200,000 homeless veterans on America's streets today -- that the risks of Post Traumatic Stress Disorder (PTSD) and traumatic brain injury (TBI) appear to be at unprecedented levels across the well over one million service members who have been deployed in the War on Terror-- that there has been a resulting influx of veterans from previous war theaters who are newly seeking VA services -- and that the healthcare needs of aging veterans continue to grow.

To assist with those needs, APA has many initiatives currently underway, including two Presidential Task Forces on the Needs of Military Service Members and Their Families, and the recently adopted "Blueprint for Change: Achieving Integrated Healthcare for an Aging Population, which is consonant with VA's groundbreaking work on primary care integration.

APA's Committee on Rural Health is now addressing ways to extend services to veterans in rural areas where existing VA and DoD facilities are simply beyond the reach of patients. And we continue to advocate for prescriptive authority for appropriately trained doctoral psychologists, particularly in those rural areas where providers are few and far between. Experience in both states where licensed psychologists have this expanded statutory authority to prescribe (New Mexico and Louisiana) , as well as a decade of data from the original DoD psychopharmacology program, have shown these practices to be safe and effective for the public.

As well, APA's public interest component works on issues of direct concern to VA, homelessness, women's sexual trauma, and family violence. In education we are creating training pipelines for specialty training of psychologists and other mental health professionals regarding soldiers' pre and post deployment needs, through both the Center for Deployment Psychology (with the Department of Defense) and in proposing expansion of our Graduate Psychology Education program. We also have recently provided testimony supporting yours and the House VA Committee's proposed increases over the Administration's FY '09 VA Medical and Prosthetic Research Account funding levels.

Recruitment and the Psychology Workforce Within VHA

As I indicated, VHA is already the single largest employer of psychologists in the nation, and has been for many years. Yet, VA continues to recognize the need to increase its psychology staffing levels in response to ever-increasing needs for services to veterans.

As a result, VHA has hired more than 800 new psychologists since 2005; thereby rapidly increasing the number of psychologists in the system to a current high of approximately 2,400, which now surpassing the previous 1995 high of approximately 1,800 psychologists nationally. The 2,400 psychologists now employed by VA range from the GS-11 to GS-15 levels.

The APA applauds VA for these tremendous and serious recent efforts to recruit additional psychologists into the system, and we have actively partnered with VA to promote the news of these openings, have attempted to assist with recruiting neuropsychologists (who are needed in increasing numbers due to TBI), and have worked to promote VA career choices by the newer generations of psychologists.

It should be noted, however, that these increased psychology staffing levels are a very recent development. Psychology staff levels were actually significantly BELOW 1995 levels until 2006. Moreover, the vast majority of new psychologist hires in VHA are younger, lesser experienced psychologists who have come into the system at the GS-13 level or below.

In contrast, at the end of 2007, the number of GS-14s in the entire system nationally was no different a few months ago that it was 12 years ago in 1995 (at 130 GS-14s total). Of additional concern to the APA is that the number of GS-15 psychologists nationally as of the end of 2007 (approximately 50) was actually considerably lower than the number of GS-15s in 1995.

To the system's credit, VA has also recognized and capitalized on the fact that the best source of recruiting new psychologists has been the Department's own training systems. Over the past two years, approximately 75% of all new psychologist hires have been prior VA trainees. And, VA is rapidly increasing its funding of psychology training. In the 2008-2009 training year, VA has added approximately 60 new psychology internship positions and 100 new postdoctoral fellowship positions, spending approximately \$5 million to do so. This will bring the total psychology training positions to approximately 620 per year nationwide.

Retention of the Psychology Workforce

Despite these positive developments in recruitment, VA's advancement and retention policies continue to be driven by outdated and overly-rigid personnel and retention systems. In addition to hiring new staff, the VA needs to retain those existing psychologists who are qualified, possess specialized skills, and are already institutionalized within the system. These psychologists are vital to service provision because of their professional expertise and knowledge of the system and its resources. However, there are several glaring obstacles to retention addressed in more detail in our written testimony that I wish to touch on briefly.

1) Lack of Uniform Psychology Leadership Positions

Since 1995, independent mental health discipline services at most facilities have been replaced with interdisciplinary Mental Health Service Lines. As a result, there has been a decrease in the number of discipline chiefs across the system. The dissolution of discipline specific services has left a clear leadership gap in terms of professional practice

accountability, guidance on the proper use of professional skills, and promotion and oversight of profession specific staff and pre-licensure training.

Psychology remains the only major mental health discipline without an officially designated leader in every medical center, analogous to the Social Work Executive.. While the number of “Chief Psychologists” is finally now increasing, a far more prevalent position is the “Lead Psychologist”, a position which is all too frequently unrecognized at the level of additional pay for additional responsibilities.

2) Inequitable Access to Key Leadership Positions

Psychologists are also not represented equitably in all levels of leadership in the VA’s healthcare delivery system. In 1998, the Under Secretary for Health (USH) attempted to correct this situation with the issuance of VHA Directive 98-018, later reissued in 2004 as VHA Directive 2004-004, which stated that “it is important that the most qualified individuals be selected for leadership positions in mental health programs regardless of their professional discipline.”

Unfortunately, the only requirement within the Directive was that announcements of VA mental health leadership positions not contain language that restricts recruitment to a specific discipline. As a result, this Directive has had little practical impact on the appointment of highly qualified psychologists to VA mental health senior leadership roles, particularly at medical school affiliated VA facilities.

3) Serious Implementation Problems in Hybrid Title 38

Psychologists remain the only doctoral healthcare providers in VA who are not included in Title 38. In late 2003, the Hybrid Title 38 system was statutorily expanded to provide psychologists (and a wide range of other non-physician disciplines) some of the same personnel and pay considerations as their physician counterparts. The hybrid model requires Professional Standards Boards to make recommendations on employment, promotion and grade for psychologists, and is still more subjective than a pure Title 38 program; unlike Title 38 where professionals are hired, promoted and retained based solely on their qualifications.

The implementation of the new Title 38 Hybrid boarding process has been extremely variable and chaotic across the system. Many Psychologist leaders from facilities throughout the country have reported that their facilities and Veterans Integrated Service Networks (VISN) have denied GS-14 and 15 promotions that have been recommended by the national boarding process. Even more frequent are reports of facilities and VISNs that have delayed or refused to forward boarding packets to the national board and/or have refused to reveal the results of the national board action.

Informational missteps and technical problems have also plagued the national psychology boarding process. Just last month, VA Central Office (VACO) sent instructions to the field that eliminated the national cap on GS-14 levels for psychologists. However, these

same instructions tied the award of GS-15 psychology positions to the facility's level of complexity, making many senior psychologist leaders ineligible for grade increases commensurate with the scope and complexity of their actual duties.

Two dramatic, but not apparently unusual examples of how these problems are affecting services have just crossed my desk. In one, a new hire, who happens to be a former State Psychological Association President and representative to APA's Committee on Early Career Psychologists, was dismissed during his probationary year after being unable to effectively discharge his dual leadership duties as the facility's new Local Recovery Coordinator as well as the Acting Supervisory Psychologist. In another facility, a more senior psychologist who was approved by the National Standards Board was denied locally for a GS-14 upgrade for her position as Psychology Program Manager and tendered her resignation on April 1st.

APA considers such problems the most serious obstacle to making VA the workplace of choice for psychologists. Without clear advancement systems in place, VA faces critical long term recruitment and retention problems. As psychologists come to believe that there is little possibility for advancement, regardless of the level or complexity of responsibilities, fewer VA psychologists will be willing to accept positions of greater responsibility. In addition, high potential trainees whom the VA would like to recruit will increasingly see VA as a "dead end" for their careers, and will be attracted to other career options that offer more potential for advancement.

Thank you for this opportunity to provide testimony today on behalf of the American Psychological Association. We stand ready to assist with the Committee's work to further improve recruitment and retention of psychologists to assist in providing care to this nation's honored veterans.